



## Certificate of Insurance

**Certificate Mailed To:**

STATE OF ARIZONA DEPT OF  
ADMINISTRATION  
ENTERPRISE PROCUREMENT SERVICES  
DIVISION  
100 NORTH 15TH AVE, SUITE 104  
PHOENIX AZ 85007

**Name of Insured:**

TELESPECTRA LLC  
STE 137  
7575 E Redfield Rd  
Scottsdale AZ 85260

Date Issued: 01/18/2006  
Certificate Number: 1  
Policy Number: 340385  
Origin Date: 08/21/2003  
Expiration Date: 08/01/2006  
Liability Limits: 100/100/500  
(000 Omitted)

**Proof of Coverage**

Telecommunications Install  
Job: State of Arizona Enterprise Procurement Services  
Contract #EPS060014

**Job Number:**

It is agreed that waiver of subrogation is effective only as respects to the above Certificate Holder for the project described herein. This agreement shall not operate directly or indirectly to benefit any other person or organization.

Should the above policy be canceled by the State Compensation Fund before the expiration date thereof, the State Compensation Fund will endeavor to mail 30 days written notice to the above named Certificate Holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the State Compensation Fund.

This Certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed hereon. This is to certify a workers' compensation policy has been issued to the insured listed hereon and is in force for the period referenced.

**Certificate Issued To:**

State of Arizona Dept of Administration  
Enterprise Procurement Services Division  
100 North 15th Ave, Suite 104  
Phoenix AZ 85007

*Greg Hermie*

Authorized Representative

EPS060014-A6-2

J.S.